

Minutes of the meeting of the Audit and Compliance Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, September 19, 2019 at the hour of 9:00 A.M. at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

I. Attendance/Call to Order

Chair Koetting called the meeting to order.

Present: Chair Mike Koetting and Directors Ada Mary Gugenheim; Robert G. Reiter, Jr.; and Layla P. Suleiman Gonzalez, PhD, JD (4)

Board Chair M. Hill Hammock (ex-officio) and Directors Mary Driscoll, RN, MPH and David Ernesto Munar

Telephonically

Present: Director Hon. Dr. Dennis Deer, LCPC, CCFC (1)

Absent: None (0)

Director Gugenheim, seconded by Director Reiter, moved to allow Director Deer to telephonically participate in the meeting as a voting member. THE MOTION CARRIED UNANIMOUSLY.

Additional attendees and/or presenters were:

Ekerete Akpan – Chief Financial Officer
Cathy Bodnar – Chief Corporate Compliance and Privacy Officer
Elizabeth Festa – CountyCare Compliance Officer
Ashley Huntington – Privacy Officer
Jeff McCutchan – General Counsel

Deborah Santana – Secretary to the Board
Tom Schroeder – Director of Internal Audit
John Jay Shannon, MD – Chief Executive Officer
Dianne Willard – CCH Compliance Officer

II. Public Speakers

Chair Koetting asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

III. Report from Chief Corporate Compliance and Privacy Officer (Attachment #1)

Cathy Bodnar, Chief Corporate Compliance and Privacy Officer, provided an overview of the information contained in the Report. The Committee reviewed and discussed the information.

The report included information on the following subjects:

- Cook County Health as a Provider of Health Care Services
 - County Fiscal Year to Date 2019 Provider Metrics (1st, 2nd, 3rd Quarters)
 - 4th Quarter Project: Auditing and Monitoring Code Assignment
- CountyCare Medicaid Health Plan Special Investigation Unit (SIU)
 - Focus Area: SIU Activity
 - State Fiscal Year 2019 SIU Metrics

III. Report from Chief Corporate Compliance and Privacy Officer (continued)

The following individuals provided additional information on the report: Ashley Huntington, Privacy Officer; Dianne Willard, CCH Compliance Officer; and Elizabeth Festa, CountyCare Compliance Officer.

IV. Action Items

A. Minutes of the Audit and Compliance Committee Meeting, June 20, 2019

Director Reiter, seconded by Director Gugenheim, moved to accept the minutes of the Audit and Compliance Committee Meeting of June 20, 2019. THE MOTION CARRIED UNANIMOUSLY.

B. Any items listed under Sections IV and V

V. Closed Meeting Items

A. Report from Director of Internal Audit

B. Discussion of Personnel Matters

Director Suleiman Gonzalez, seconded by Director Deer, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” and 5 ILCS 120/2(c)(29), regarding “meetings between internal or external auditors and governmental audit committees, finance committees, and their equivalents, when the discussion involves internal control weaknesses, identification of potential fraud risk areas, known or suspected frauds, and fraud interviews conducted in accordance with generally accepted auditing standards of the United States of America.”

On the motion to recess the open meeting and convene into a closed meeting, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chair Koetting and Directors Deer, Gugenheim, Reiter and Suleiman Gonzalez (5)

Nays: None (0)

Absent: None (0)

THE MOTION CARRIED UNANIMOUSLY and the Committee convened into a closed meeting.

Chair Koetting declared that the closed meeting was adjourned. The Committee reconvened into the open meeting.

VI. Adjourn

As the agenda was exhausted, Chair Koetting declared the meeting ADJOURNED.

Respectfully submitted,
Audit and Compliance Committee of the Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Mike Koetting, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Requests/Follow-up:

There were no requests for follow-up at this meeting.

Cook County Health and Hospitals System
Audit and Compliance Committee Meeting
September 19, 2019

ATTACHMENT #1

Corporate Compliance Report

Audit & Compliance Committee of the Board of Directors

September 19, 2019



Meeting Objectives

Review

- Cook County Health as a Provider of Health Care Services
 - County Fiscal Year-to-Date (F-YTD) 2019 Provider Metrics (Q 1-2-3)
 - Q4 Project: Auditing & Monitoring Code Assignment
- CountyCare Medicaid Health Plan Special Investigation Unit (SIU)
 - Focus Area: SIU Activity
 - State Fiscal Year (S-FY) 2019 SIU Metrics

Metrics



Cook County Health as a Provider of Care



COOK COUNTY
HEALTH

Key Components of a Compliance Program

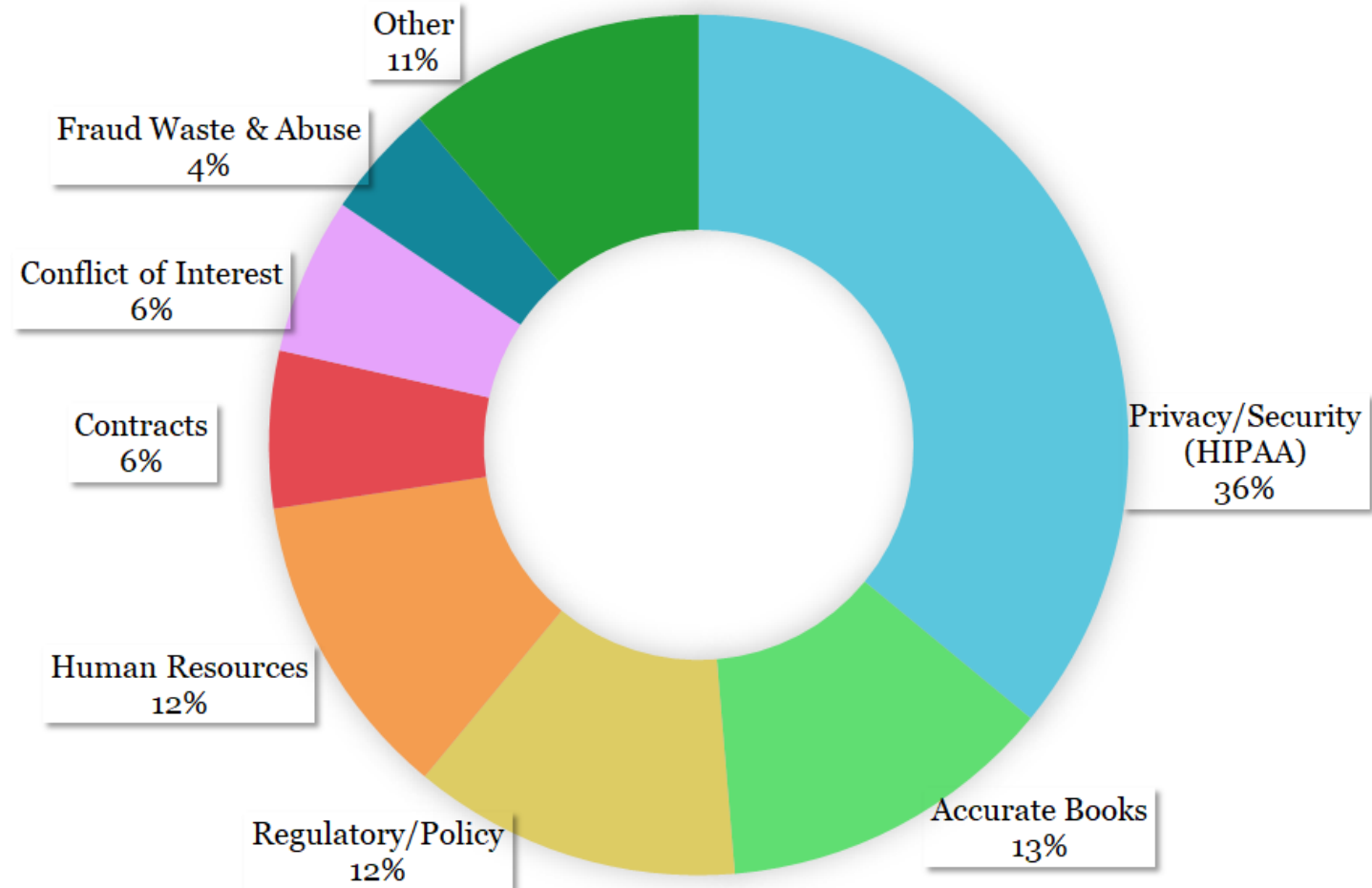
Seven Essential Elements of Compliance¹

- 1: Written policies and procedures
- 2: A designated corporate compliance officer and compliance committee
- 3: Effective training and education
- 4: **Open lines of communication**
- 5: Enforcement through well-publicized disciplinary guidelines
- 6: Auditing and monitoring
- 7: Corrective action plans

¹ Compliance Program elements are cited within the Patient Protection and Affordable Care Act of 2010 (PPACA) Sections 6401 in addition to Sections 6102 and OIG guidance materials

F-YTD 2019 Contacts by Category

CCH as a Provider of Care – Dec 2018 through Aug 2019



Categories	
Privacy/Security (HIPAA)	201
Accurate Books	71
Regulatory/Policy	69
Human Resources	65
Contracts	33
Conflict of Interest	33
Fraud Waste & Abuse	24
Other	63
	559 ²

² Of the reactive contacts, 21% were validated/substantiated.

Key Components of a Compliance Program

Seven Essential Elements of Compliance

- 1: Written policies and procedures
- 2: A designated corporate compliance officer and compliance committee
- 3: Effective training and education
- 4: Open lines of communication
- 5: Enforcement through well-publicized disciplinary guidelines

6: **Auditing and monitoring**

- 7: Corrective action plans

FY 2019 Auditing and Monitoring Project

Developed from Industry Standards & Internal Activity

Areas of Focus: Medical Records Coding

SOURCE	OIG ³ Work Plan FY 2018+FY 2019	AHIMA ⁴ Web-site	HCCA ⁵ Data	CCH Historical Public Data	CCH Internal Input
INPATIENT					
DRG 313 – Chest Pain	✓	✓	✓	✓	✓
DRG 690 - Kidney and Urinary Tract Infection w/o Major Complication Comorbidity	✓	✓	✓	✓	✓
OUTPATIENT					
Cardiac Catheterizations	✓	✓	✓	✓	✓
Dermatology Visits and Procedures	✓	✓	✓	✓	✓

³ OIG refers to the US Department of Health and Human Services Office of Inspector General

⁴ AHIMA refers to the American Health Information Management Association, a nationally recognized professional association for Health Information Management professionals

⁵ HCCA refers to the Health Care Compliance Association, a national organization for healthcare compliance professionals

FY 2019 External Coding Audit Project

Inpatient Coding

Reviewing 25 Records/Claims for facility and professional-fee coding in 2 Diagnosis Related Groups (DRG) Categories:

- DRG 313 - Chest Pain
 - High Frequency DRG
 - May indicate lost opportunity (not capturing more specific diagnosis(es))
 - Validate if compliant with the admission criteria.
- DRG 690 – Kidney and Urinary Tract Infections W/O Major Complication Comorbidity (MCC)
 - High Frequency DRG
 - May indicate lost opportunity (not capturing MCC)
 - May indicate documentation improvement needed.

FY 2019 External Coding Audit Project

Outpatient Coding

Probe sample of 25 Records/Claims for facility and professional-fee coding in 2 Outpatient Areas:

- Cardiac Catheterizations
 - Complex Coding where Add-on procedures can be under or over coded
 - Supplies and other services not captured correctly
- Dermatology
 - High Volume of visits and procedures
 - May indicate lost opportunity for capturing all services/procedures based on documentation and coding

Questions?



CountyCare

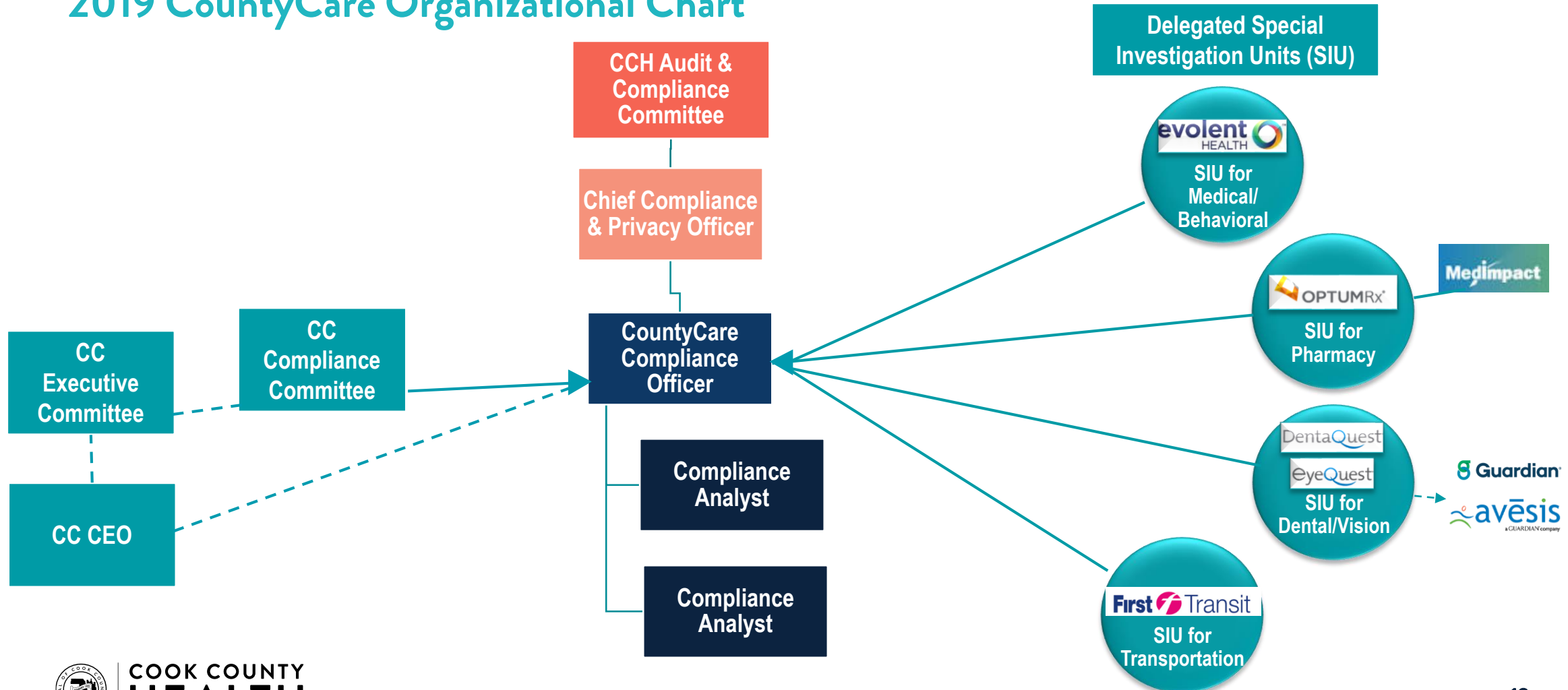


Medicaid Health Plan Special Investigation Units (SIU)



CountyCare Compliance Structure

2019 CountyCare Organizational Chart



Special Investigation Unit (SIU) Activity

State Fiscal Year 2019 (July 1, 2018 – June 30, 2019)

Number of Tips ¹	Number of Investigations ²	Number of Audits ³	Amount of Overpayments Collected ⁴
237	170	26,424	\$ 1,986,699.41

- ¹ Tips Incidents of suspected FWA by a provider or member; not vetted
- ² Investigations Any tip that has monetary exposure; provider or member specific
- ³ Audits Claim lines implicated by data mining or algorithms;
Data mining/algorithms are trend specific, not provider specific
- ⁴ Overpayments Collected Money actually recouped and in the bank; small amount may be paid back to the provider on a corrected claim

Investigations vs. Audits

Examples

Investigations	Audits
Provider upcoding Evaluation & Management codes	Granulocyte-colony stimulating factor (G-CSF), with Chemotherapy
Transportation provider billing for trips not performed	Date Span Code Frequency
Dentist billing for services provided by non-credentialed providers	Multiple Surgery Reduction (100/50/25/25)
Home care provider billing for services not rendered	Preventative Medicine with E&M Code

Questions?

